

6/25/03

**BEHAVIORAL / ENVIRONMENTAL RISK FACTORS  
FOR CHILDHOOD DROWNING**

**CONTROL QUESTIONNAIRE  
AGES 10-19**

**Sponsored by:**

**National Institute for Child Health and Human Development  
National Institutes of Health (NIH)  
Bethesda, Maryland**

**Westat**

- 1. SITE ID:**
- 2. CASE ID:**
- 3. CONTROL ID:**
- 4. INTERVIEWER NAME:** *(Please print)*
- 5. DATE OF INTERVIEW:**
- 6. TIME INTERVIEW BEGAN:** \_\_\_\_:\_\_\_\_ AM PM
- 7. TIME INTERVIEW ENDED:** \_\_\_\_:\_\_\_\_ AM PM
- 8. 1ST NAME OF CHILD:**
- 9. GENDER OF CHILD:**
- 10. DATE OF ACCIDENT (CASE)/ REFERENCE DATE:**
- 11. COUNTY WHERE CHILD/CASE DROWNED:**
- 12. CHILD DATE OF BIRTH:**
- 13. AGE CATEGORY:** 10-19
- 14. RESPONDENT RELATIONSHIP TO CHILD:**

<input type="checkbox"/>	Mother
<input type="checkbox"/>	Father
<input type="checkbox"/>	Grandmother
<input type="checkbox"/>	Grandfather
<input type="checkbox"/>	Other (SPECIFY): _____

Gender: M F

**INTERVIEWER:** Note the gender of "Other"

## ELIGIBILITY CONFIRMATION

Before we begin, I would just like to confirm some information we have regarding (CHILD'S NAME) and where (he/she) was living in (REFERENCE MM/YY).

**EL-1. First, since this study is only being conducted in certain counties across the country, we would like to confirm that on (REFERENCE DATE), (CHILD'S NAME) lived in (COUNTY OF RESIDENCE). Is that correct?**

**EXTD.COUNTYCH**

YES.....1 (SKIP TO QUESTION EL-2)  
NO.....2

**EL-1a. On (REFERENCE DATE), where did (CHILD'S NAME) live? Please tell me the city, state, zip code, and county. (IF CHILD LIVED OUTSIDE OF U.S., ENTER '99' FOR CITY)**

CITY:\_\_\_\_\_

STATE:\_\_\_\_\_

**EXTD.CITY**

**EXTD.STATE**

ZIP CODE:\_\_\_\_\_

COUNTY:\_\_\_\_\_

**EXTD.ZCODE**

**EXTD.COUNTYOFRESIDENCE**

(UNLESS ZIP CODE MATCHES TO SAMPLED COUNTY, SKIP TO BOX EL-1)

**EL-2. Based on our last interview with someone in your household, our records indicate that (CHILD'S NAME) was born in (BIRTH MONTH) of (BIRTH YEAR). Is that correct?**

**EXTD.CONBIRTH**

YES.....1 (SKIP TO BOX EL-1)  
NO.....2

**EL-2a. What is (CHILD'S NAME) month and year of birth?**

MONTH: \_\_\_\_\_

YEAR: \_\_\_\_\_

**EXTD.BIRTHMO**

**EXTD.BIRTHYR**

[IF NECESSARY, VERIFY AGE RANGE]

### BOX EL-1

If child lived in a different county, go to BOX EL-2.  
Else if child's age does not match the control based on the matching criteria, go to BOX EL-3.  
Else, if unknown if child lived in county, go to BOX EL-4.  
Else proceed with interview and go to QUESTION 1a.

### BOX EL-2

[INTERVIEWER – READ TO PARENT/GUARDIAN OF CHILD]. At this time we are only able to include residents of (COUNTY OF DROWNING) in this study. Thank you very much for your time. **END**

BOX EL-3

[INTERVIEWER – READ TO PARENT/GUARDIAN OF CHILD]. At this time, we are not able to include your household for this study. We may contact you again later for an interview. Thank you very much for your time. **END**

BOX EL-4

[INTERVIEWER – READ TO PARENT/GUARDIAN OF CHILD]. At this time, we are not able to include your household for this study. Thank you very much for your time. **END**

## ENVIRONMENTAL FACTORS

We don't know how to prevent drowning accidents, so there are no right or wrong answers to any of the questions.

During this interview, for most of the questions I would like you to think back to (REFERENCE MM/YY) unless I tell you otherwise. When responding to the questions, please try to recall as best you can how (CHILD'S NAME) behaved on or about that date. In other words, try to answer as if you were being asked the question at that time.

1. What is your relationship to (CHILD'S NAME)? Are you (his/her)...

EXTD.RELACH

Mother,..... 1  
Father, ..... 2  
Grandmother, ..... 3  
Grandfather, or..... 4  
Some other relationship?  
(SPECIFY) [ASK GENDER IF NOT OBVIOUS]

EXTD.RELACHOS

EXTD.OTHGEND

..... 91

2. Did (CHILD'S NAME) live with you on (REFERENCE DATE)?

EXTD.CHLIVE

YES..... 1

NO..... 2



- 2a. With whom did (CHILD'S NAME) live most of the time the year prior to (REFERENCE DATE)?

EXTD.LIVE

MOTHER ..... 1

FATHER..... 2

BOTH MOTHER AND FATHER ..... 3

GRANDPARENT(S)..... 4

OTHER RELATIVE ..... 5

SOMEONE ELSE (SPECIFY) ..... 91

EXTD.OTHLIVE

(NOTE: FOR QUESTION 3 TO 6 - IF QUESTION 2 = NO (CHILD DID NOT LIVE WITH RESPONDENT ON REF DATE), CHANGE FILLS TO GATHER INFO ON CHILD'S HOUSEHOLD.)

3. Up until (REFERENCE DATE), how long had (CHILD'S NAME) lived at this residence?

EXTD.NUMLIVE

— WEEKS..... 1

MONTHS..... 2

YEARS..... 3

EXTD.UNITLIVE

4. Did you ...  
EXTD.OWNRENT

Own your residence,.....1  
Rent your residence,.....2  
Live with family,.....3  
Live with friends, or.....4  
Was it some other type of living arrangement?  
(SPECIFY).....91



EXTD.OTHOWNRE

4a. Did the people that (CHILD'S NAME) lived with own or rent their residence?

EXTD.OWNHOME

OWN..... 1  
RENT..... 2

5. Are you currently living at this same residence?

EXTD.SAMERES

YES..... 1  
NO..... 2

6. [IF NO TO QUESTION 5: Now I would like you to think about the residence in which you lived in on REFERENCE DATE.] Would you describe your residence as...

EXTD.CURRES

An Apartment, .....1 (SKIP TO QUESTION 17)  
A Single Family House, .....2  
A Duplex, .....3  
A Townhouse or Rowhouse,.....4  
A Mobile or Trailer Home, or.....5  
Something else? (SPECIFY) .....91

EXTD.OTHCURRE

(Note – 7 through 14 will be one large grid)

7. In (REFERENCE MM/YY), was there a ...  YARD.LOCATED	8. Was the water in the (STRUCTURE) deeper than 2 feet at its deepest point?  YARD.WATDEEP	9. Was the (STRUCTURE) in place the whole time you lived there?  YARD.INPLACE	10. Was the (STRUCTURE) a permanent structure?  YARD.PERMSTRU
a. <u>swimming pool</u> located in your yard or home? Do not include wading pools. YES.....1 → NO.....2 (b)	a. YES ..... 1 NO ..... 2	a. YES ..... 1 NO ..... 2	a. YES ..... 1 NO ..... 2
b. <u>Jacuzzi or hot tub</u> located in your yard or home? Please do not include Jacuzzi's or hot tubs located in a bathroom. YES.....1 → NO.....2 (c)	b. YES ..... 1 NO ..... 2	b. YES ..... 1 NO ..... 2	b. YES ..... 1 NO ..... 2

<b>c. <u>wading pool</u> located in your yard?</b> YES.....1      → NO.....2 (d)	c. YES ..... 1 NO ..... 2	c. YES ..... 1 NO ..... 2	c. YES ..... 1 NO ..... 2
<b>d. <u>pond, lake or some other body of water</u> located in your yard?</b> YES..1 (SPECIFY IF OTHER) → NO...2  _____ <b>YARD.LOCATOS</b>	d. YES ..... 1 NO ..... 2	d. YES ..... 1 NO ..... 2	

<b>11. How long has the (STRUCTURE) been there?</b> (SKIP IF QUESTION 9 = YES) <b>YARD.NUMSTRU</b>	<b>12. Was the design of the (STRUCTURE)...</b> <b>YARD.INABOVE</b>	<b>13. Where was the (STRUCTURE) located in relation to the residence? Was it in the...</b> <b>YARD.STRUTLOC</b>	<b>14. Could the (STRUCTURE) be seen from inside the home?</b> <b>YARD.INHOMEST</b>
a. WEEKS.....1 MONTHS.....2 YEARS .....3 <b>YARD.UNITSTRU</b>	a. in-ground, or..... 1 above ground? .. 2	a. back yard, ..... 1 front yard, ..... 2 side yard, or ..... 3 inside the home or residence? .. 4	a. YES ..... 1 NO ..... 2
b. WEEKS.....1 MONTHS.....2 YEARS .....3	b. in-ground, or..... 1 above ground? .. 2	b. back yard, ..... 1 front yard, ..... 2 side yard, or ..... 3 inside the home or residence? ... 4	b. YES ..... 1 NO ..... 2
c. WEEKS.....1 MONTHS.....2 YEARS .....3	c. in-ground, or..... 1 above ground? .. 2	c. back yard, ..... 1 front yard, ..... 2 side yard, or ..... 3 inside the home or residence? ... 4	c. YES ..... NO ..... 2
d. WEEKS.....1 MONTHS.....2 YEARS .....3	d. →	d. back yard, ..... 1 front yard, or..... 2 side yard? ..... 3	d. YES ..... 1 NO ..... 2

BOX 1

IF RESPONSES TO ALL OF QUESTIONS 7a-d = NO, SKIP TO QUESTION 17.

IF 7a AND 7b = 1, SKIP TO QUESTION 14.5.

ELSE SKIP TO QUESTION 15.

**14.5 Is the Jacuzzi or hot tub attached to the pool?**  
**YARD.JACPOOL**

YES..... 1  
 NO..... 2

REPEAT QUESTIONS 15 – 16 FOR ALL BODIES OF WATER WITH A “YES” RESPONSE IN QUESTION 7, EXCEPT IF 14.5 = YES. THEN ASK 15-16 ONCE FOR POOL/JACUZZI COMBINATION AND FOR OTHER ‘YES’ RESPONSES IN QUESTION 7.

15. In (REFERENCE MM/YY), was there a fence surrounding the (STRUCTURE)?

YARD.FENCESUR

YES..... 1  
NO..... 2 (SKIP TO QUESTION 17)

16. Did the fence completely surround the (STRUCTURE) on all 4 sides, or could you access the (STRUCTURE) directly from your home without having to go through a gate of a fence?

YARD.FENCECOM

STRUCTURE COMPLETELY SURROUNDED BY FENCE .. 1  
STRUCTURE ACCESSIBLE FROM HOME ..... 2

(IF ANSWER TO QUESTION 5 = ‘YES,’ SKIP MENTION OF REFERENCE PERIOD)

17. (In (REFERENCE MM/YY)), approximately how long (does/did) it take to get from (CHILD’S NAME)’s home to the nearest swimming pool [not including the pool in (his/her) own yard]? This would include such things as a pool at a neighbor’s home, a pool in an apartment or condominium community, a community pool, or a city pool.

EXTD.NUMPOOL

\_\_\_\_\_ UNIT: MINUTES....1 EXTD.UNITPOOL  
HOURS.....2

- 17a. Is the time you gave based on...

EXTD.EXTDMODE

Walking, ..... 1  
Riding a bicycle, ..... 2  
Driving, or..... 3  
Some other method of transportation?  
(SPECIFY)\_\_\_\_\_ 91

EXTD.OTHMODE

18. Was there a fence or other barrier surrounding this swimming pool?

EXTD.BARPOOL

YES..... 1  
NO..... 2

19. How long (did/does) it take to get from (CHILD'S NAME)'s home to the nearest lake, river, pond, ocean, or other large body of water, aside from a swimming pool?

EXTD.NUMLAKE

\_\_\_\_\_ UNIT: MINUTES....1 EXTD.UNITLAKE  
HOURS.....2

- 19a. Is the time you gave based on ...

EXTD.MODELAKE

Walking, ..... 1

Riding a bicycle, ..... 2

Driving, or..... 3

Some other method of transportation?

(SPECIFY) \_\_\_\_\_ 91

EXTD.OTHLAKE

<p><b>20. In the months of (2 MONTHS PRIOR TO ACCIDENT) and (MONTH OF ACCIDENT) on how many days did (CHILD'S NAME)...</b> VIST.NUMMOTE</p>	<p><b>21. Did (he/she) visit (BODY OF WATER) at least once?</b> [ONLY ASK IF QUESTION 20 = DK] VIST.NUMMOTDK</p>	<p><b>22. Was there usually a lifeguard on duty?</b> VIST.HOTLIFE</p>
<p>a. Visit a hotel or motel with a swimming pool? _____ → number of days [If days = 0, go to b]</p>	<p>a. YES.....1 NO.....2 (b)</p>	<p>a. YES.....1 (b) NO.....2 (b)</p>
<p>b. Visit a swim center or community pool? _____ → number of days [If days = 0, go to c]</p>	<p>b. YES.....1 NO.....2 (c)</p>	<p>b. YES.....1 (c) NO.....2 (c)</p>
<p>c. Visit an ocean, lake, pond or river? _____ → number of days [If days = 0, go to d]</p>	<p>c. YES.....1 NO.....2 (d)</p>	<p>c. YES.....1 (d) NO.....2 (d)</p>
<p>d. Visit a water theme park? _____ → number of days [If days = 0, go to e]</p>	<p>d. YES.....1 NO.....2 (e)</p>	<p>d. YES.....1 (e) NO.....2 (e)</p>
<p>e. Visit another home where (CHILD'S NAME) had access to a pool or some other large body of water? _____ → number of days [If days = 0, go to Question 23]</p>	<p>e. YES.....1 NO.....2 [If no, go to Question 23]</p>	<p>e. YES.....1 NO.....2</p>



23. Prior to (REFERENCE MM/YY), how often had (CHILD'S NAME) been on a boat? Please do not include cruise ships. Would you say...

EXTD.BOAT

1 time per year, ..... 1  
2 to 5 times per year,..... 2  
6 to 10 times per year,..... 3  
11 to 20 times per year, or ..... 4  
More than 20 times per year? .. 5  
NEVER ..... 99 (SKIP TO QUESTION 24)

- 23a. Prior to (REFERENCE MM/YY), when (CHILD'S NAME) went out on a boat, did (he/she) usually wear a life vest?

EXTD.LIFEVEST

YES ..... 1  
NO ..... 2

#### FORMAL SWIMMING LESSONS

The next group of questions will be about the formal swimming lessons that (CHILD'S NAME) may have participated in prior to (REFERENCE MM/YY). We don't know if swimming lessons can help prevent drowning among young children, so there are no right or wrong answers.

24. Children sometimes receive formal swimming lessons that are paid for or that are received as part of another activity such as day care, school or camp. Prior to (REFERENCE MM/YY), had (CHILD'S NAME) ever taken formal swimming lessons? Please do not include swim team.

EXTD.FORMAL

YES ..... 1  
NO ..... 2 (SKIP TO QUESTION 32)

25. Often children are enrolled in a swimming course that includes a group of classes that meet regularly over a number of weeks. For example a course might include 1 class per week for 8 weeks. Thinking back to all the courses that (CHILD'S NAME) took prior to (REFERENCE MM/YY), how many separate courses did (he/she) attend altogether? [PROBE IF RESPONDENT DOES NOT KNOW OR CAN NOT REMEMBER THE NUMBER OF COURSES: Please tell me how many courses you can remember.]

EXTD.COURSES

\_\_\_\_\_ (# OF COURSES)

- 25a. [ASK ONLY IF QUESTION 25 = DK] Do you know how many years (CHILD'S NAME) participated in swimming courses prior to (REFERENCE MM/YY)?

EXTD.COURYEAR

\_\_\_\_\_ (# OF YEARS)

26. How many swim courses did (CHILD'S NAME) attend before the age of 5? [PROBE IF NECESSARY: Please tell me how many courses you can remember.]

EXTD.UNDRFIVE

\_\_\_\_\_ (# OF COURSES)

27. How old was (CHILD'S NAME) when (he/she) took (his/her) first formal swimming lessons?

EXTD.AGEL

\_\_\_\_ (AGE) UNITS: MONTHS.... 1 EXTD.AGELU  
YEARS..... 2

28. How old was (CHILD'S NAME) when (he/she) took (his/her) most recent formal swimming course, not including swim team?

EXTD.AGER

\_\_\_\_ (AGE) UNITS: MONTHS.... 1 EXTD.AGELRU  
YEARS..... 2

I am now going to ask you a series of questions about the swimming course(s) (CHILD'S NAME) took prior to (REFERENCE MM/YY).

[IF 3 OR MORE COURSES: I am only going to ask you about the first course (CHILD'S NAME) participated in and the most recent course (CHILD'S NAME) participated in. I will start with (CHILD'S NAME)'s first course.]

[IF 2 COURSES: Now thinking about the first course (CHILD'S NAME) took.]

	COURSE # 1	COURSE #2
29. What was the name of the swimming course? For example, Aquatots, Water Babies, Beginning Swimming, or Advanced Swimming? CLAS.NAMEC	Name:	Name:
a. Could you please tell me the name of the facility and sponsoring organization that offered this course and the city and state in which the facility is located.  CLAS.FACNAMC	Facility:  Sponsoring Organization: CLAS.SPONSORG City: CLAS.CITYFAC State: CLAS.STATEFAC	Facility:  Sponsoring Organization:  City:  State:
b. Were these swimming lessons taught in a ...  CLAS.WHERECL	Pool, .....1 Lake, .....2 Ocean, or .....3 Some other type of water? .....91 (SPECIFY)_____ CLAS.WHERECOS	Pool,..... 1 Lake, ..... 2 Ocean, or..... 3 Some other type of water? .....91 (SPECIFY)_____
c. How old was (CHILD'S NAME) at the beginning of the course?  CLAS.AGEBEG	____ UNITS: MONTHS (age) YEARS  CLAS.AGEBUNIT	____ UNITS: MONTHS (age) YEARS

d.	What was the month and year in which the course began? <b>CLAS.BEGMON</b>	____ / ____ M M   Y Y <b>CLAS.BEGYEAR</b>	____ / ____ M M   Y Y
e.	How many times per week did the classes meet? <b>CLAS.MEETWK</b>	____ UNITS: WEEK (# times)      MONTH <b>CLAS.MEETUNIT</b>	____ UNITS: WEEK (# times)      MONTH
f.	On average, how many minutes was each class? <b>CLAS.MINUTECL</b>	____ (number of minutes)	____ (number of minutes)
g.	For this course, what was the total number of classes that (CHILD'S NAME) attended? (PROBE): Please give me your best estimate. <b>CLAS.CLASSES</b>	____ (number of classes)	____ (number of classes)
h.	Who usually took (CHILD'S NAME) to (his/her) swimming lesson? <b>CLAS.WHOTOOK</b>	RESPONDENT .....1 MOTHER .....2 FATHER .....3 GRANDMOTHER .....4 GRANDFATHER .....5 OTHER RELATIVE (SPECIFY) _____ .....91 OTHER NON-RELATIVE (SPECIFY) _____ .....92 <b>CLAS.WHTOOKOS</b>	RESPONDENT ..... 1 MOTHER ..... 2 FATHER ..... 3 GRANDMOTHER ..... 4 GRANDFATHER ..... 5 OTHER RELATIVE (SPECIFY) _____ ..... 91 OTHER NON-RELATIVE (SPECIFY) _____ ..... 92
i.	Did (PERSON NAMED IN QUESTION 29h) usually watch the lessons? <b>CLAS.DIDWATCH</b>	YES .....1 NO .....2	YES .....1 NO .....2
j.	How many children, including (CHILD'S NAME) were in the group? <b>CLAS.HOWMANYC</b>	____ (number of children)	____ (number of children)
k.	Was an adult, other than the instructor, required to be in the water with each child? <b>CLAS.ADULTREQ</b>	YES .....1 NO .....2	YES .....1 NO .....2
There are many different skills that are taught in swimming lessons. I am going to read to you a list of some skills and would like you to tell me if the lessons in this course focused <u>not at all, a little, some, or a lot</u> on these skills. I would be happy to repeat the categories if you need them.			
30.	The first skill is helping children feel comfortable in the water; like getting them used to putting their face in the water. Would you say these lessons focused on this .... <b>CLAS.COMFORT</b>	Not at all, .....1 A little, .....2 Some, or .....3 A lot? .....4 NO INFORMATION .....99	Not at all, .....1 A little, .....2 Some, or .....3 A lot? .....4 NO INFORMATION 99 .....99

[IF RESPONDENT VOLUNTEERS THAT HE OR SHE HAS NO INFORMATION ABOUT WHAT SKILLS WERE TAUGHT IN THE COURSE, ENTER 99 (SKIP TO 30h)]		
<b>a. Treading water. Would you say the lessons focused on this...</b> <b>CLAS.TREADWTR</b>	Not at all,..... 1 A little, ..... 2 Some, or ..... 3 A lot? ..... 4	Not at all, ..... 1 A little, ..... 2 Some, or ..... 3 A lot? ..... 4
<b>b. Floating on (his/her) back.</b> <b>CLAS.FLOATBCK</b>	NOT AT ALL ..... 1 A LITTLE ..... 2 SOME ..... 3 A LOT ..... 4	NOT AT ALL ..... 1 A LITTLE ..... 2 SOME ..... 3 A LOT ..... 4
<b>c. Poolside behavior; like not running on the deck.</b> <b>CLAS.BEHAVIOR</b>	NOT AT ALL ..... 1 A LITTLE ..... 2 SOME ..... 3 A LOT ..... 4	NOT AT ALL ..... 1 A LITTLE ..... 2 SOME ..... 3 A LOT ..... 4
<b>d. Swimming strokes and kicks.</b> <b>CLAS.STROKES</b>	NOT AT ALL ..... 1 A LITTLE ..... 2 SOME ..... 3 A LOT ..... 4	NOT AT ALL ..... 1 A LITTLE ..... 2 SOME ..... 3 A LOT ..... 4
<b>e. Was (CHILD'S NAME) forced to put (his/her) head underwater as part of this course?</b> <b>CLAS.UNDERWTR</b>	YES ..... 1 NO ..... 2	YES ..... 1 NO ..... 2
<b>f. Is there any other information about this swimming course that you think would be important for us to know?</b> <b>CLAS.OTHINFO</b>	YES ..... 1 NO ..... 2 (SKIP TO 30h)	YES ..... 1 NO ..... 2 (SKIP TO 30h)
<b>g. [What other information about this swimming course would you like to tell me?]</b> <b>CLAS.TEXT1-4</b>	(RECORD RESPONSE)	(RECORD RESPONSE)
<b>h. After completing this swimming course, did (CHILD'S NAME)'s behavior change when (he/she) was around water?</b> YES ..... 1 NO ..... 2 (SKIP TO QUESTION 31) <b>CLAS.CHANGBCH</b>		
<b>i. How did (his/her) behavior change?</b> _____ <b>CLAS.HWCHANGA</b> <b>CLAS.HWCHANGB</b>		
<b>j. (ASK ONLY IF QUESTION 25 = DON'T KNOW OR REFUSED) Did (CHILD'S NAME) take any other swimming courses?</b> YES ..... 1 NO ..... 2		

REPEAT QUESTIONS 29 THROUGH 30i FOR THE MOST RECENT COURSE.

31. Prior to the age of 2 years, did (CHILD'S NAME) participate in swimming lessons that focused on survival skills such as rotating from a face down position to a back float, resting, and then flipping back over to continue swimming?

EXTD.SURVSKIL

YES..... 1  
NO..... 2

32. Prior to (REFERENCE MM/YY), did (he/she) ever participate in competitive swimming, such as team swimming?

EXTD.COMPSWIM

YES..... 1  
NO..... 2



32a.

For how many years did (CHILD'S NAME) participate in competitive swimming?

EXTD.COMPNUM

\_\_\_ \_\_\_ (# OF YEARS)

#### EXPOSURE TO WATER AND INFORMAL SWIMMING LESSONS

ONLY ASK QUESTION 33 IF CHILD NEVER TOOK FORMAL LESSONS NOR PARTICIPATED IN SWIM TEAM (QUESTION 24 AND 32 = NO).

33. Prior to (REFERENCE MM/YY), had (CHILD'S NAME) ever been in a swimming pool, pond, or other body of water, not including a bathtub?

EXTD.INWATER

YES..... 1  
NO..... 2 (SKIP TO QUESTION 57)

34. How often on average did (CHILD'S NAME) go swimming during the summer months of May through September? Would you say ...

EXTD.GOSWIMSU

Every day or almost every day, .. 1  
3 to 5 times per week, ..... 2  
1 to 2 times per week, ..... 3  
2 to 3 times per month, ..... 4  
Once a month or less, or ..... 5  
Not at all?..... 6

35. How often on average did (CHILD'S NAME) go swimming during the months of October through April? Would you say ...

EXTD.GOSWIMOT

Every day or almost every day, .. 1  
3 to 5 times per week, ..... 2  
1 to 2 times per week, ..... 3  
2 to 3 times per month, ..... 4  
Once a month or less, or ..... 5  
Not at all?..... 6

36. During the past year, how often did (CHILD'S NAME) use a life vest when (he/she) went swimming? Would you say...

EXTD.LIFVEST

Always, ..... 1  
Most of the time, ..... 2  
Some of the time, ..... 3  
On rare occasions, or ..... 4  
Never? ..... 5  
DID NOT SWIM ..... 6 (SKIP TO QUESTION 39)

37. How often did (he/she) use another flotation device when (he/she) went swimming, such as an inflatable tube? Would you say...

EXTD.PERSFLOT

Always, ..... 1  
Most of the time, ..... 2  
Some of the time, ..... 3  
On rare occasions, or ..... 4  
Never? ..... 5 (SKIP TO QUESTION 39)

38. What kind of flotation device did (he/she) use most often?

EXTD.PERSDEVI

INFLATABLE TUBE ..... 2  
RAFT ..... 3  
OTHER (SPECIFY): \_\_\_\_\_ 91 EXTD.PERSDEOS

39. Thinking about all the times (CHILD'S NAME) went swimming prior to (REFERENCE MM/YY), how often did (he/she) swim without a lifeguard or adult present? Would you say...

EXTD.NOLIFEG2

Never, ..... 1  
Rarely, ..... 2  
Sometimes, ..... 3  
Often, ..... 4  
Almost Always, or ..... 5  
Always? ..... 6

40. Prior to (REFERENCE MM/YY), how often did (CHILD'S NAME) swim in a lake, river, pond, ocean, or other natural body of water? Please do not include swimming pools?  
Would you say...

EXTD.SWIMNATU

Never, .....1 (SKIP TO QUESTION 41)  
Less than once per year,....2  
1 to 10 times per year.....3  
11 to 25 times per year,....4  
26 to 50 times per year, or..5  
Over 50 times per year?.....6

- 40a. Other than pools, what type of water did (he/she) usually swim in? Was it a...

EXTD.TYPENATU

Lake,.....01  
River,.....02  
Pond, .....03  
Ocean, or .....04  
Some other natural body of water?  
(SPECIFY).....91 EXTD.TYPENAOS

- 40b. When (he/she) swam in a (NATURAL BODY OF WATER TYPE FROM QUESTION 40a), did (he/she) usually swim using a life preserver or other personal flotation device for assistance?

EXTD.TYPEPERS

YES .....1  
NO .....2

41. Thinking back to (REFERENCE MM/YY), at that time how comfortable was (CHILD'S NAME) in the water? Would you say (he/she) was...

EXTD.COMFWAT

Uncomfortable, .....1  
Slightly uncomfortable, .....2  
Comfortable, or .....3  
Very comfortable? .....4

42.	In (REFERENCE MM/YY), at that time was (CHILD'S NAME) comfortable with...	YES	NO
a.	walking by (himself/herself) in water up to (his/her) waist? EXTD.COMWAIST	1	2
b.	putting (his/her) whole head underwater? EXTD.COMHEAD	1	2
c.	jumping into water over (his/her) head? EXTD.COMDEEP	1	2
d.	playing or swimming in water over (his/her) head? EXTD.COMPLAY	1	2

43. Children sometimes receive informal swimming instructions or receive swimming pointers or tips from family and friends. Thinking back to before (CHILD'S NAME) was 5 years old, how often did (CHILD'S NAME) receive informal swimming instructions, or pointers or tips about swimming or water safety? Please do not include pointers or tips (he/she) may have received while in a bathtub. Would you say (he/she) received pointers or tips...

EXTD.POINTSLO

Every time (he/she) went swimming, ... 1  
 Most of the time, ..... 2  
 Some of the time, ..... 3  
 Rarely, or ..... 4  
 Never?..... 5

- 43a. Prior to (REFERENCE MM/YY), did (CHILD'S NAME) ever receive informal swimming instructions or pointers or tips about swimming or water safety?

EXTD.POITEVR

YES ..... 1  
 NO ..... 2 (SKIP TO QUESTION 49)

44. At what age did (CHILD'S NAME) receive (his/her) first informal pointers or informal swimming instructions?

EXTD.POINTAGE

\_\_\_

UNIT: MONTHS....1 EXTD.POINTUNI  
 YEARS.....2

45. At what age did (CHILD'S NAME) receive (his/her) most recent pointers or informal swimming instructions prior to (REFERENCE MM/YY)?

EXTD.RECENAGE

\_\_\_

UNIT: MONTHS....1 EXTD.RECENUNI  
 YEARS.....2

46.	Would you say that the <u>first</u> pointers or informal instructions (CHILD'S NAME) received focused not at all, very little, somewhat or a lot on the following items.	NOT AT ALL	VERY LITTLE	SOME-WHAT	A LOT
a.	Treading water. Would you say... EXTD.POINTTRE	1	2	3	4
b.	Floating on (his/her) back. EXTD.POINTBAC	1	2	3	4
c.	Swimming strokes and kicks. EXTD.POINTKIC	1	2	3	4
d.	Diving. EXTD.POINTDIV	1	2	3	4



<b>47.</b>	<b>Would you say that the <u>most recent</u> pointers or informal instructions (CHILD'S NAME) received focused not at all, very little, somewhat or a lot on the following items.</b>	<b>NOT AT ALL</b>	<b>VERY LITTLE</b>	<b>SOME- WHAT</b>	<b>A LOT</b>
<b>a.</b>	<b>Treading water. Would you say...</b> <b>EXTD.PTTREAD</b>	1	2	3	4
<b>b.</b>	<b>Floating on (his/her) back.</b> <b>EXTD.PTFLOAT</b>	1	2	3	4
<b>c.</b>	<b>Swimming strokes and kicks.</b> <b>EXTD.PTSWIMST</b>	1	2	3	4
<b>d.</b>	<b>Diving.</b> <b>EXTD.PTDIVING</b>	1	2	3	4

- 48.** Is there anything else about the swimming pointers or informal instructions that you think would be important for us to know?

**EXTD.POINTELS**

YES..... 1

NO.....2 (SKIP TO QUESTION 49)

**48a.** Specify\_\_\_\_\_

**DESC.DESCTEXT**

- 49.** In (REFERENCE MM/YY) how would you have rated (CHILD'S NAME) as a swimmer. Would you say...

**EXTD.SWIMRATE**

Excellent, ..... 1

Very good, ..... 2

Good, ..... 3

Fair, or..... 4

Poor? ..... 5

- 50.** Next I am going to read to you a list of things some children can do in the water. For each one, thinking back to (REFERENCE MM/YY), at that time could (CHILD'S NAME) do this without using a life preserver or other flotation device for assistance most of the time (he/she) was in a swimming pool.

	YES	NO	NEVER ATTEMPTED
<b>a.</b> Could (CHILD'S NAME) jump into the water from a standing position without assistance? <b>EXTD.JUMPWAT</b>	1	2	3
<b>b.</b> Could (CHILD'S NAME) jump in the pool, swim out 5 feet, and then swim back to the edge of the pool? <b>EXTD.SWIMFEET</b>	1	2	3
<b>c.</b> Could (CHILD'S NAME) swim on (his/her) stomach for about 15 feet without stopping? <b>EXTD.SWIMSTOM</b>	1	2	3
<b>d.</b> Could (CHILD'S NAME) float on (his/her) back without support for 10 seconds? <b>EXTD.FLOATBAC</b>	1	2	3

e.	Could (CHILD'S NAME) swim on (his/her) back for about 15 feet without stopping? <b>EXTD.SWIMFEE</b>	1	2	3
<b>IF NO TO 50b, 50c, 50d, AND 50e, SKIP TO QUESTION 56.</b> <b>IF DON'T KNOW/REFUSED TO 50b, 50c, 50d, AND 50e, SKIP TO QUESTION 51.</b>				
f.	Enter the pool feet first and swim to an object or person standing about 15 feet away? <b>EXTD.FLOATFEE</b>	1	2	3
g.	Swim on (his/her) stomach, take a breath of air and continue swimming forward? <b>EXTD.SWIMSTO</b>	1	2	3
h.	If (CHILD'S NAME) were in water over (his/her) head and about 15 feet from the edge of the pool, could (he/she) swim towards the edge of the pool and hold onto the side of the pool? <b>EXTD.HOLDEGE</b>	1	2	3
i.	If (CHILD'S NAME) were in water over (his/her) head and about 15 feet from the edge of the pool, could (he/she) swim towards the edge of the pool and climb out of the water? <b>EXTD.SWIMCLIM</b>	1	2	3
j.	Swim 50 feet using any kind of stroke? <b>EXTD.FEETSTRK</b>	1	2	3
k.	Dive into the water? (SKIP TO QUESTION 52) <b>EXTD.DIVEWAT</b>	1	2	3

51. Do you think you would be able to answer any questions about (CHILD'S NAME)'s swimming abilities?

**EXTD.SWIMABIL**

YES.....1 (GO BACK TO QUESTION 50f)

NO.....2 (SKIP TO QUESTION 56)

52. How old was (CHILD'S NAME) when (he/she) was first able to swim without help or without using a life preserver or other flotation device for assistance? [IF SUBJECT UNABLE TO SWIM, ENTER '99']

**EXTD.AGESWIM**

\_\_\_\_\_  
(age)

UNIT: MONTHS...1 **EXTD.UNITSWIM**

YEARS.....2

53. In (REFERENCE MM/YY), about how many minutes do you think (he/she) could tread water without stopping? Would you say... [IF CHILD CANNOT TREAD WATER AT ALL, ENTER '99']

EXTD.TREWAT2

Less than 1 minute, ..... 1  
1 to 4 minutes, ..... 2  
5 to 9 minutes, or ..... 3  
10 minutes or more? ..... 4

54. In (REFERENCE MM/YY), about how many minutes do you think (CHILD'S NAME) could swim without stopping? Would you say...

EXTD.SWIMSTP2

Less than 1 minute, ..... 1  
1 to 4 minutes, ..... 2  
5 to 9 minutes, or ..... 3  
10 minutes or more? ..... 4

55. If the length of a standard swimming pool equals 25 yards [75 feet], how many pool lengths could (CHILD'S NAME) swim without stopping using any stroke prior to (REFERENCE MM/YY)?

EXTD.SWIMLEN

\_\_\_\_\_ (# OF LENGTHS)

(SKIP TO QUESTION 57)

56. In (REFERENCE MM/YY), did (CHILD'S NAME) know how to swim at all?

EXTD.CANSWIM

YES.....1 (SKIP TO QUESTION 57)  
NO .....2

- 56a. Prior to (REFERENCE MM/YY) had you ever seen (CHILD'S NAME) paddle a few yards and then hold onto something such as the edge of a pool or dock?

EXTD.CANPADL

YES..... 1  
NO.....2

## ADOLESCENT BEHAVIOR

Now I am going to ask you some questions about (CHILD'S NAME)'s behavior.

57. How likely do you think (CHILD'S NAME) was to wear a helmet when (he/she) rode a bicycle during the past year? Would you say...[IF CHILD DID NOT RIDE A BIKE AT ALL, ENTER '99']

EXTD.HELMET

Not at all, ..... 1  
Very unlikely, ..... 2  
Possible, or..... 3  
Very likely? ..... 4

58. How likely do you think (CHILD'S NAME) was to wear a seatbelt when (he/she) rode in a car during the past year? Would you say...  
EXTD.SEATBELT
- Not at all, ..... 1  
Very unlikely, ..... 2  
Possible, or..... 3  
Very likely? ..... 4
59. During the past year, how likely do you think (CHILD'S NAME) would be to swim in an isolated or remote location, for example, a place that was out of the way or not usually used by swimmers? Would you say...  
EXTD.SWIMISOL
- Not at all, ..... 1  
Very unlikely, ..... 2  
Possible, or..... 3  
Very likely? ..... 4
60. [During the past year,] How likely was it that (CHILD'S NAME) regularly smoked cigarettes?  
EXTD.REGSMOKE
- NOT AT ALL ..... 1  
VERY UNLIKELY ..... 2  
POSSIBLE ..... 3 (SKIP TO QUESTION 62)  
VERY LIKELY ..... 4 (SKIP TO QUESTION 62)
61. [During the past year,] How likely was it that (CHILD'S NAME) tried cigarettes, even one or two puffs?  
EXTD.TRYSMOKE
- NOT AT ALL ..... 1  
VERY UNLIKELY ..... 2  
POSSIBLE ..... 3  
VERY LIKELY ..... 4
62. [During the past year,] How likely was it that (CHILD'S NAME) regularly drank alcohol?  
EXTD.REGDRANK
- NOT AT ALL ..... 1  
VERY UNLIKELY ..... 2  
POSSIBLE ..... 3 (SKIP TO QUESTION 64)  
VERY LIKELY ..... 4 (SKIP TO QUESTION 64)
63. [During the past year,] How likely was it that (CHILD'S NAME) tried drinking alcohol?  
EXTD.TRYDRINK
- NOT AT ALL ..... 1  
VERY UNLIKELY ..... 2  
POSSIBLE ..... 3  
VERY LIKELY ..... 4

64. [During the past year,] How likely was it that (CHILD'S NAME) regularly smoked marijuana?  
EXTD.REGPOT
- NOT AT ALL ..... 1  
VERY UNLIKELY ..... 2  
POSSIBLE.....3 (SKIP TO QUESTION 66)  
VERY LIKELY .....4 (SKIP TO QUESTION 66)
65. [During the past year,] How likely was it that (CHILD'S NAME) tried smoking marijuana?  
EXTD.TRYPOT
- NOT AT ALL ..... 1  
VERY UNLIKELY ..... 2  
POSSIBLE.....3  
VERY LIKELY .....4
66. [During the past year,] How likely was it that (CHILD'S NAME) regularly sniffed glue, breathed the contents of aerosol spray cans or inhaled other gases or sprays in order to get high?  
EXTD.SNIFGLUE
- NOT AT ALL ..... 1  
VERY UNLIKELY ..... 2  
POSSIBLE.....3 (SKIP TO QUESTION 68)  
VERY LIKELY.....4 (SKIP TO QUESTION 68)
67. [During the past year,] How likely was it that (CHILD'S NAME) tried sniffing glue, breathing the contents of aerosol spray cans or inhaling other gases or sprays in order to get high?  
EXTD.TRYSNIF
- NOT AT ALL ..... 1  
VERY UNLIKELY ..... 2  
POSSIBLE.....3  
VERY LIKELY .....4
68. Thinking about (CHILD'S NAME) closest friends, how many do you think do the following things?

	NONE	SOME	MOST	ALL
a. Smoke cigarettes? Would you say none, some, most, or all of (CHILD'S NAME)'s closest friends? EXTD.SMKCIG	1	2	3	4
b. Drink alcohol? Would you say none, some, most, or all? EXTD.DRINKALC	1	2	3	4
c. Bully or pick on others? EXTD.BULLY	1	2	3	4
d. Talk or act disrespectfully to teachers? EXTD.DISRESPE	1	2	3	4
e. Get into physical fights with others? EXTD.FIGHTS	1	2	3	4
f. Lie to their parents or guardians about where they are or whom they are with? EXTD.LIE	1	2	3	4

<b>g. Mark with graffiti [tag] or damage something that does not belong to them?</b> <b>EXTD.GRAFFITI</b>	1	2	3	4
<b>h. Ride a bicycle without wearing a helmet?</b> <b>EXTD.NOHELMET</b>	1	2	3	4
<b>i. Ride in a car without wearing a seatbelt?</b> <b>EXTD.NOSEAT</b>	1	2	3	4
<b>j. Swim in a remote or unguarded location?</b> <b>EXTD.UNGUARD</b>	1	2	3	4

## **SENSATION SEEKING**

**I am now going to read to you a series of statements. Please try to consider how well each statement describes (CHILD'S NAME)'s personality.**

- 69. If (CHILD'S NAME) has to wait in a long line, (he/she) usually is patient about it. Would you say that statement describes (CHILD'S NAME)...**

**EXTD.WAITLINE**

Very well, ..... 1  
Somewhat, ..... 2  
Not very well, or ..... 3  
Not at all?..... 4

- 70. When (CHILD'S NAME) listens to music, (he/she) likes it to be loud. Would you say that statement describes (CHILD'S NAME)...**

**EXTD.MUSIC**

Very well, ..... 1  
Somewhat, ..... 2  
Not very well, or ..... 3  
Not at all?..... 4

- 71. When taking a trip, (CHILD'S NAME) thinks it is best to make as few plans as possible and just take it as it comes.**

**EXTD.TAKETRIP**

VERY WELL.....1  
SOMEWHAT.....2  
NOT VERY WELL....3  
NOT AT ALL.....4

- 72. (CHILD'S NAME) stays away from movies that are said to be frightening or highly suspenseful.**

**EXTD.MOVIES**

VERY WELL.....1  
SOMEWHAT.....2  
NOT VERY WELL....3  
NOT AT ALL.....4

73. **(CHILD'S NAME) feels it is fun and exciting to perform or speak before a group.**  
**EXTD.SPKGROUP**  
VERY WELL.....1  
SOMEWHAT.....2  
NOT VERY WELL....3  
NOT AT ALL.....4
74. **If (CHILD'S NAME) were to go to an amusement park, (he/she) would prefer to ride the roller coaster or other fast rides.**  
**EXTD.AMUSPARK**  
VERY WELL.....1  
SOMEWHAT.....2  
NOT VERY WELL....3  
NOT AT ALL.....4
75. **(CHILD'S NAME) would like to travel to places that are strange and far away.**  
**EXTD.TRAVEL**  
VERY WELL.....1  
SOMEWHAT.....2  
NOT VERY WELL....3  
NOT AT ALL.....4
76. **(CHILD'S NAME) likes movies where there are a lot of explosions and car chases.**  
**EXTD.EXPLOS**  
VERY WELL.....1  
SOMEWHAT.....2  
NOT VERY WELL....3  
NOT AT ALL.....4
77. **In general, (CHILD'S NAME) works better when (he/she) is under pressure.**  
**EXTD.PRESSURE**  
VERY WELL.....1  
SOMEWHAT.....2  
NOT VERY WELL....3  
NOT AT ALL.....4
78. **(CHILD'S NAME) often likes to have the radio or television on while (he/she) is doing something else, such as reading or cleaning up.**  
**EXTD.RADIO**  
VERY WELL.....1  
SOMEWHAT.....2  
NOT VERY WELL....3  
NOT AT ALL.....4
79. **(CHILD'S NAME) feels it would be interesting to see a car accident happen.**  
**EXTD.SEECAR**  
VERY WELL.....1  
SOMEWHAT.....2  
NOT VERY WELL....3  
NOT AT ALL.....4

80. (CHILD'S NAME) thinks it is best to order something familiar when eating in a restaurant.  
EXTD.RESTAUR

VERY WELL.....1  
SOMEWHAT.....2  
NOT VERY WELL....3  
NOT AT ALL.....4

81. (CHILD'S NAME) likes the feeling of standing next to the edge on a high place and looking down.

EXTD.NEXTEDGE

VERY WELL.....1  
SOMEWHAT.....2  
NOT VERY WELL....3  
NOT AT ALL.....4

82. If it were possible to visit another planet or the moon for free, (CHILD'S NAME) would be among the first in line to sign up.

EXTD.MOONFREE

VERY WELL.....1  
SOMEWHAT.....2  
NOT VERY WELL....3  
NOT AT ALL.....4

83. (CHILD'S NAME) is likely to do things such as riding a bicycle down hill with no hands or skateboarding down hill.

EXTD.DOWNHILL

VERY WELL.....1  
SOMEWHAT.....2  
NOT VERY WELL....3  
NOT AT ALL.....4

## HEALTH AND MEDICAL HISTORY

Now I would like to ask you some questions about (CHILD'S NAME)'s health and medical history.

84. In general, would you say (CHILD'S NAME)'s health is...

EXTD.GENHLTH

Excellent, ..... 1  
Very good, ..... 2  
Good, ..... 3  
Fair, or..... 4  
Poor? ..... 5

85. Prior to (REFERENCE MM/YY) had (CHILD'S NAME) ever seen a doctor for epilepsy or a seizure disorder?

EXTD.EVERSEIZ

YES..... 1  
NO.....2 (SKIP TO QUESTION 86)



85a. During the past year had (CHILD'S NAME) had a seizure?

EXTD.YRSEIZ

YES..... 1

NO..... 2

85b. In (ONE MONTH PRIOR TO REFERENCE MM/YY), was (CHILD'S NAME) taking medicine to prevent seizures?

EXTD.MEDSEIZ

YES..... 1

NO..... 2

86. Prior to (REFERENCE MM/YY), did a doctor ever say that (CHILD'S NAME) had a health problem expected to last 6 months or longer, including any physical or mental impairments, learning disabilities, or other serious conditions?

EXTD.HLTHPROB

YES..... 1

NO..... 2



86a. What type of health problem was it? (MARK ALL THAT APPLY)

EXTD.EPILEPSY

EPILEPSY /SEIZURE DISORDER..... 1

EXTD.ASTHMA

ASTHMA..... 2

EXTD.ATTDHD

ATTENTION DEFICIT HYPERACTIVITY DISORDER.... 3

EXTD.PHYMEOTH

OTHER PHYSICAL OR MENTAL CONDITION (SPECIFY)

..... .91 EXTD.TYPEPROS

87. In (ONE MONTH PRIOR TO REFERENCE MM/YY), did (CHILD'S NAME) take any prescription medications? Do not include antibiotics, vitamins or medications that (he/she) would have taken for a cold or fever [but do include the seizure medication if it was prescription].

EXTD.MEDSPRE

YES..... 1

NO..... 2 (SKIP TO QUESTION 88)

87a. What were these medications? (SPECIFY)	87b. What was this medication for? (SPECIFY)
MEDS.TYPEMED	MEDS.MEDFOR

88. Prior to (REFERENCE MM/YY), had (CHILD'S NAME) ever had a fainting episode?

EXTD.FAINTEPI

YES..... 1

NO..... 2

89. Prior to (REFERENCE MM/YY), had (CHILD'S NAME) ever had an electrocardiogram, that is an EKG or an ECG?

EXTD.EKGECG

YES..... 1

NO..... 2

90. Has anyone in (CHILD'S NAME)'s family ever died from drowning?

EXTD.OTHDIED

YES..... 1

NO..... 2

—————▶ 90a. What was their age at the time of drowning?

EXTD.OTHAGE

\_\_\_\_ (age in years)



90b. What was the person's relationship to (CHILD'S NAME)? Was it a...

EXTD.OTHRELA

Parent, ..... 1

Sibling, ..... 2

Grandparent, or ..... 3

Some other relative? ..... 4

91. How would you rate yourself as a swimmer? Would you say...

EXTD.RATESWIM

Excellent, ..... 1

Very good, ..... 2

Good, ..... 3

Fair, or ..... 4

Poor? ..... 5

92. How would you rate your spouse or companion as a swimmer? Would you say...

EXTD.RATESPOU

Excellent, ..... 1

Very good, ..... 2

Good, ..... 3

Fair, ..... 4

Poor, or ..... 5

Do you not have a spouse or companion? .... 6

93. Has anyone in (CHILD'S NAME)'s family died suddenly from a heart condition or some unknown cause before the age of 40 years?

EXTD.HEARTCON

YES... 1

NO... 2



- 93a. What was this person's relationship to (CHILD'S NAME)? Was it a...

EXTD.HEARTRE

Parent, ..... 1

Sibling, ..... 2

Grandparent, or ..... 3

Some other relative? ..... 4

- 93b. Please describe what happened.

DESC.DESCTEXT

---

---

94. Did (CHILD'S NAME) ever have an episode in which (he/she) nearly drowned and was taken to a physician's office or emergency department?

EXTD.EMERDEPT

YES.....1

NO.....2



- 94a. Can you please tell me when this occurred?

EXTD.EMERMO

EXTD.EMERYR

\_\_\_\_ / \_\_\_\_  
MM YY

- 94b. Please describe what happened.

DESC.DESCTEXT

---

---

95. Prior to (REFERENCE MM/YY), did you receive any advice from (CHILD'S NAME)'s doctor or nurse about swimming lessons?

EXTD.DRADVICE

YES.....1

NO.....2



- 95a. Did the advice you received...

EXTD.TYPADV

Recommend taking swimming lessons, .....1

Recommend against taking swimming lessons, or .....2

Did you receive some other advice? .....91

(SPECIFY) \_\_\_\_\_ EXTD.TYPADVOS

## DAILY ROUTINES (AGE 10-14)

Now I would like to ask you some questions about (CHILD'S NAME) daily routine prior to (REFERENCE MM/YY).

96. Was (CHILD'S NAME)...

EXTD.ENSCHOOL

- Enrolled in school,.....1 (SKIP TO QUESTION 103)  
Home schooled, or.....2 (SKIP TO QUESTION 104)  
Not enrolled in school?....3 (SKIP TO QUESTION 104)

## DAILY ROUTINES (AGE 15-19)

Now I would like to ask you some questions about (CHILD'S NAME)'s daily routine during the week, on the weekends, and during the summer prior to (REFERENCE MM/YY).

97. Was (CHILD'S NAME) enrolled in school just prior to (REFERENCE MM/YY)?

EXTD.ENROLL

- YES.....1 (IF CHILD AGE  $\geq$  17, GO TO QUESTION 98,  
OTHERWISE, SKIP TO QUESTION 103)  
NO.....2 (SKIP TO QUESTION 102)

98. Was this school a college or university?

EXTD.COLLUNIV

- YES.....1  
NO.....2 (SKIP TO QUESTION 103)

99. Could you please tell me the city, state, and county where this school is located?

EXTD.COLLCITY

EXTD.COLSTAT

EXTD.COLLCITY

\_\_\_\_\_  
(City) (State) (County)

100. Was (he/she) enrolled in this school...

EXTD.ENRPTFT

- Part-time, or.....1  
Full-time?.....2

101. Where did (CHILD'S NAME) spend (his/her) most recent summer? Was (he/she)....

EXTD.DOSUMMER

- At home,.....1 (SKIP TO QUESTION 109)  
EXTD.DOSUMOS1 At school, or.....2 (SKIP TO QUESTION 109)  
EXTD.DOSUMOS2 Somewhere else? (SPECIFY)\_\_\_\_\_ 91 (SKIP TO QUESTION 109)

102. You indicated that (CHILD'S NAME) was not enrolled in school. What was (his/her) main activity? Was (he/she)...

EXTD.ENROLLNO

- Working full-time,.....1 (SKIP TO QUESTION 105)  
Working part-time, or.....2 (SKIP TO QUESTION 105)  
Doing something else?  
(SPECIFY)\_\_\_\_\_ 91 (SKIP TO QUESTION 105)

EXTD.ENROLLOS

## DAILY ROUTINES (AGE 10-19)

- 103. During the school year, where did (CHILD'S NAME) usually go after school? Did (he/she) usually go...**

EXTD.AFTSC2

To (his/her) own home,.....1  
 To a relative's home,.....2  
 To an after school extended day program, or.....3  
 Somewhere else?  
 (SPECIFY) \_\_\_\_\_91

EXTD.AFTSC20S

- 104. Prior to (REFERENCE MM/YY), where did (CHILD'S NAME) usually spend (his/her) weekends? Did (he/she) usually spend them ...**

EXTD.CAREWK

At home, .....1  
 At a relative's home, or.....2  
 Somewhere else?  
 (SPECIFY) \_\_\_\_\_91

EXTD.CAREWKOS

<b>105. During the most recent summer, did (CHILD'S NAME) attend or work as a counselor at...</b>  CAMP.COUNSEL	<b>106. How many weeks did (CHILD'S NAME) attend or work at the (overnight camp/day camp/summer school)?</b>  CAMP.WEEKCOUN	<b>107. Were there any bodies of water at the (overnight camp/day camp/summer school), such as a swimming pool, Jacuzzi, wading pool, pond, lake, river, or some other body of water?</b> CAMP.CAMPWAT	<b>108. What kind of body of water was it? Was it a... [CODE ALL THAT APPLY]</b>  CAMP.WATPOOL CAMP.WATJAC CAMP.WATWAD CAMP.WATPOND CAMP.WATRIVER CAMP.WATOTH CAMP.TYPEWAOS
<b>a. an overnight camp?</b> YES...1 → NO....2 (b)	<b>a.</b> ____ (# of weeks)	<b>a.</b> YES...1 → NO....2 (b)	<b>a.</b> Swimming pool,.....1 Jacuzzi or hot-tub,.....2 Wading pool,.....3 Pond or lake, .....4 River, or .....5 Some other body of water? (SPECIFY) _____91
<b>b. a day camp?</b> YES...1 → NO....2 (c)	<b>b.</b> ____ (# of weeks)	<b>b.</b> YES...1 → NO....2 (c)	<b>b.</b> Swimming pool,.....1 Jacuzzi or hot-tub,.....2 Wading pool,.....3 Pond or lake, .....4 River, or .....5 Some other body of water? (SPECIFY) _____91

<b>c. a summer school?</b> YES...1 → NO...2 (QUESTION 109)	<b>c.</b> ____ (# of weeks)	<b>c.</b> YES...1 → NO...2 (QUESTION 109)	<b>c.</b> Swimming pool,..... 1 Jacuzzi or hot-tub,..... 2 Wading pool,..... 3 Pond or lake, ..... 4 River, or ..... 5 Some other body of water? (SPECIFY) _____ 91
------------------------------------------------------------------	--------------------------------	-------------------------------------------------	---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

## SOCIODEMOGRAPHIC QUESTIONS

I have just a few more questions to ask you about yourself and (CHILD'S NAME)'s household.

109. What was your age in (REFERENCE MM/YY)?

EXTD.RESPYYYY

\_\_\_\_ (YEARS)

110. Are you of Hispanic or Latino origin?

EXTD.RESPHISP

YES..... 1

NO..... 2

111. Which one or more of the following would you say best describes your race? Would you say... [IF RESPONDENT SAYS "HISPANIC", PROBE FOR ONE OF THE LISTED CATEGORIES]

EXTD.RAAMEIND American Indian or Alaska Native, ..... 1  
 EXTD.RAASIAN Asian, ..... 2  
 EXTD.RABLACK Black or African-American, ..... 3  
 EXTD.HAWPAC Native Hawaiian or other Pacific Islander, or..... 4  
 EXTD.RAWHITE White?..... 5  
 EXTD.RAOTHER OTHER (SPECIFY)\_\_\_\_\_ 91  
 EXTD.RESRACOS

112. Is (CHILD'S NAME) of Hispanic or Latino origin?

EXTD.CHILHISP

YES..... 1

NO..... 2

113. Which one or more of the following would you say best describes (CHILD'S NAME)'s race? Would you say... [IF RESPONDENT SAYS "HISPANIC", PROBE FOR ONE OF THE LISTED CATEGORIES]

EXTD.CHAMEIND American Indian or Alaska Native, ..... 1  
 EXTD.CHASIAN Asian, ..... 2  
 EXTD.CHBLACK Black or African-American, ..... 3  
 EXTD.CHHAWPAC Native Hawaiian or other Pacific Islander, or..... 4  
 EXTD.CHWHITE White?..... 5  
 EXTD.CHOTHER OTHER (SPECIFY)\_\_\_\_\_ 91  
 EXTD.CHIRACOS

(NOTE: QUESTIONS 114-118a– IF RESPONSE TO QUESTION 2 = NO, CHANGE FILLS TO COLLECT DATA ON CHILD’S HOUSEHOLD)

114. In (REFERENCE MM/YY), how many people under age 20, including (CHILD’S NAME) [and yourself], lived in your household?

EXTD.NUMCHHS

NUMBER OF CHILDREN: \_\_\_\_

115. In (REFERENCE MM/YY), how many adults age 20 or over [including yourself,] lived in your household?

EXTD.NUMADHS

NUMBER OF ADULTS: \_\_\_\_

<p>116. Please give me the ages of everyone, other than (CHILD’S NAME) and yourself, who lived in your household in (REFERENCE MM/YY) and their relationship to (CHILD’S NAME). [IF AGE IS LESS THAN 1 YEAR, WE WILL ASK FOR THE NUMBER OF MONTHS]</p> <p>[ALLOW UP TO 15 PEOPLE]</p> <p>HOHO.HOHOAGE</p>	<p>116a. What is this person’s relationship to (CHILD’S NAME)?</p> <p>HOHO.REL</p>
<p>a. ____ (# # #)</p> <p>MONTHS.....1</p> <p>YEARS.....2</p> <p>HOHO.HOHOMON</p>	<p>a.</p> <p>MOTHER/STEPMOTHER..... 1</p> <p>FATHER/STEPFATHER ..... 2</p> <p>SIBLING ..... 3</p> <p>SPOUSE/PARTNER..... 4</p> <p>DAUGHTER/SON..... 5</p> <p>GRANDPARENT ..... 6</p> <p>UNRELATED PERSON (INCL. ROOMMATE) ..7</p> <p>OTHER RELATIVE (SPECIFY)..... 91</p> <p>HOHO.HHMRELOS</p>

117. [ASK IF MORE THAN ONE CHILD LISTED ABOVE AND SOMEONE’S AGE IS REFUSED OR UNKNOWN] Of the \_\_\_\_ (NUMBER OF CHILDREN LISTED IN 114) children and teenagers under age 20 that you stated were living in your household in (REFERENCE MM/YY), from oldest in age to the youngest in age, where did (CHILD’S NAME) fall? For example, was (he/she) the...

EXTD.CHFALL

Oldest, ..... 1

Second oldest, ..... 2

Third oldest, ..... 3

Fourth oldest, ..... 4

Fifth oldest, or ..... 5

Something else? (SPECIFY) \_\_\_\_ 91 EXTD.CHFALLOS

<b>118. In the last calendar year, what was your combined annual household income from all sources and before taxes? This would include all income received by everyone that lived in the household during the last calendar year. Would you say...</b>	<b>118a. Was it...</b> <b>EXTD.HHINCOME</b>
\$25,000 or less, ..... 1 → <b>EXTD.HHINCOV1</b>	\$10,000 or less, ..... 1 \$10,001 to \$15,000, ..... 2 \$15,001 to \$20,000, or, ..... 3 \$20,001 to \$25,000? ..... 4
\$25,001 - \$50,000, ..... 2 → <b>EXTD.HHINCOV2</b>	\$25,001 to \$30,000, ..... 5 \$30,001 to \$35,000, ..... 6 \$35,001 to \$40,000, ..... 7 \$40,001 to \$45,000, or, ..... 8 \$45,001 to \$50,000? ..... 9
\$50,001 - \$75,000, or ..... 3 → <b>EXTD.HHINCOV3</b>	\$50,001 to \$55,000, ..... 10 \$55,001 to \$60,000, ..... 11 \$60,001 to \$65,000, ..... 12 \$65,001 to \$70,000, or, ..... 13 \$70,001 to \$75,000? ..... 14
more than \$75,000 ..... 4 → <b>EXTD.HHINCOV4</b>	\$75,001 to \$80,000, ..... 15 \$80,001 to \$85,000, ..... 16 \$85,001 to \$90,000, ..... 17 \$90,001 to \$95,000, or, ..... 18 or more than \$95,000? ..... 19

BOX 2

IF RESPONSE TO QUESTION 2 = NO, SKIP TO QUESTION 129.  
ELSE GO TO QUESTION 119.

**119. In (REFERENCE MM/YY), which of the following best described your working status? Were you...**

**EXTD.RESEMP**

- Self-employed, ..... 1
- Working for an employer, ..... 2
- Looking for employment, ..... 3
- A homemaker, ..... 4
- Retired, ..... 5
- Unable to work or disabled, or, ..... 6
- Something else? (SPECIFY) ..... 91

**EXTD.RESEMPOS**



120. In (REFERENCE MM/YY), were you enrolled in school or college?

EXTD.ENROLLED

YES.....1 —————→  
NO.....2

120a. Were you enrolled in school...

EXTD.ENRLPTFT

Part-time, or.... 1  
Full-time?..... 2

121. What is the highest grade or year of school you completed? [READ LIST ONLY IF NECESSARY]

EXTD.HGHGRADE

8<sup>th</sup> GRADE OR LESS..... 1  
9<sup>TH</sup> TO 12<sup>TH</sup> GRADE (NO DIPLOMA)..... 2  
HIGH SCHOOL DIPLOMA/GED..... 3  
SOME VOC/TECH/BUSINESS ..... 4  
VOC/TECH/BUSINESS CERTIFICATE OR DIPLOMA ..... 5  
SOME COLLEGE..... 6  
ASSOCIATE'S DEGREE (AA, AS)..... 7  
BACHELOR'S DEGREE (BA, BS) ..... 8  
SOME GRADUATE/PROFESSIONAL SCHOOL..... 9  
GRADUATE/PROFESSIONAL DEGREE ..... 10  
(MA, MS, PHD, MD, ETC.)  
OTHER (SPECIFY)..... 91

EXTD.HGHGRAOS

122. In (REFERENCE MM/YY) were you...

EXTD.MARITALS

Married or living as married couple, .. 1  
Divorced, ..... 2  
Widowed,..... 3  
Separated, or ..... 4  
Never married? ..... 5 (SKIP TO QUESTION 129)

123. Has your marital status changed since that time? [ONLY ASK IF AT LEAST 1 MONTH PAST REFERENCE DATE]

EXTD.CHSTATUS

YES.....1  
NO.....2 (SKIP TO QUESTION 126)

124. How did your marital status change?

EXTD.HOWCHNGE

GOT MARRIED..... 1  
GOT DIVORCED ..... 2  
BECOME WIDOWED..... 3  
SEPARATED FROM SPOUSE OR PARTNER ..... 4  
SOMETHING ELSE (SPECIFY)..... 91 EXTD.HOWCHNOS

125. How long ago did this occur?

EXTD.LONGAGO

EXTD.LONGAGOU

\_\_\_\_\_  
# # #  
DAYS AGO.....1  
WEEKS AGO.....2  
MONTHS AGO.....3

126. [SKIP IF NO SPOUSE/COMPANION] In (REFERENCE MM/YY), which of the following best described your spouse or companion's working status. Was he or she ...

EXTD.SPEMLPST

Self-employed, ..... 1  
 Working for an employer,..... 2  
 Looking for employment,..... 3  
 A homemaker,..... 4  
 Retired,..... 5  
 Unable to work or disabled, or..... 6  
 Something else? (SPECIFY).....91

EXTD.SPEMLPOS \_\_\_\_\_

127. [SKIP IF NO SPOUSE/COMPANION] In (REFERENCE MM/YY), was your spouse or companion enrolled in school or college?

EXTD.SPSCHOOL

YES.....1

NO.....2

————→ 127a. Was your spouse or companion enrolled in school...

EXTD.SPPTFT

Part-time, or..... 1

Full-time? ..... 2

128. [SKIP IF NO SPOUSE/COMPANION] What was the highest grade or year of school completed by your spouse or companion who lived with you? [READ LIST ONLY IF NECESSARY]

EXTD.SPGRAD

8<sup>th</sup> GRADE OR LESS ..... 1  
 9<sup>th</sup> TO 12<sup>th</sup> GRADE (NO DIPLOMA) ..... 2  
 HIGH SCHOOL DIPLOMA/GED ..... 3  
 SOME VOC/TECH/BUSINESS ..... 4  
 VOC/TECH/BUSINESS CERTIFICATE OR DIPLOMA ..... 5  
 SOME COLLEGE ..... 6  
 ASSOCIATE'S DEGREE (AA, AS)..... 7  
 BACHELOR'S DEGREE (BA, BS) ..... 8  
 SOME GRADUATE/PROFESSIONAL SCHOOL ..... 9  
 GRADUATE/PROFESSIONAL DEGREE ..... 10  
 (MA, MS, PHD, MD, ETC.)

EXTD.SPGRADOS

OTHER (SPECIFY)..... 91

Now that we are near the end of the interview, I would like to ask you a few questions about this questionnaire and about the experience of being interviewed. This will help us to improve our interviewing procedures in the future.

129. First, do you think that this interview was ...

EXTD.INTLNGTH

Too short,..... 1

Too long, or ..... 2

Just about right? ..... 3

130. Did you find this interview to be stressful? Would you say it was...

EXTD.INSTRESS

Not at all stressful, ..... 1  
A little stressful, ..... 2  
Somewhat stressful, or ..... 3  
Very stressful? ..... 4

131. If you were asked, would you participate in an interview like this again?

EXTD.PRTAGAIN

YES..... 1  
NO..... 2

132. That was my last question. Do you have any additional comments that you would like to add regarding this questionnaire?

EXTD.OTHCOMM

YES..... 1 (SPECIFY BELOW)  
NO..... 2

132a. DESC.DESCTEXT \_\_\_\_\_

Thank you very much for your time and cooperation. We are sending a check for \$25.00 to all participants in this study.

133. We would like to confirm your name, address, and telephone number.

[INTERVIEWER: PLEASE CONFIRM INFORMATION ON THE SCREEN, CORRECT AS NECESSARY.]

FIRST NAME: \_\_\_\_\_ LAST NAME: \_\_\_\_\_

ADDR.FNAM

ADDR.LNAM

NUMBER AND STREET: \_\_\_\_\_ APT #: \_\_\_\_\_

ADDR.STREET

ADDR.APT

CITY/TOWN: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

ADDR.CITY

ADDR.ST

ADDR.ZIP

PHONE NUMBER: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

ADDR.AREA

ADDR.EXCH

ADDR.LOCL

**133a. [DOES RESPONDENT WANT \$25 CHECK?]**

**EXTD.WANTCHEK**

YES ..... 1

NO ..... 2 (SKIP TO END 1)

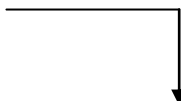
DONATE TO CHARITY ..... 3 (SKIP TO QUESTION 134a)

**134. Is this the address to which I should mail the check?**

**EXTD.CHECKADD**

YES...1

NO.....2



**134a. Please give me the name, address and telephone number of the (person/organization) to (whom/which) we should mail the check?**

**FIRST NAME:** \_\_\_\_\_ **LAST NAME:** \_\_\_\_\_

**ADDR.FNAM**

**ADDR.LNAM**

**ORGANIZATION:** \_\_\_\_\_

**ADDR.ORGANIZ**

**NUMBER AND STREET:** \_\_\_\_\_ **APT #:** \_\_\_\_\_

**ADDR.STREET**

**ADDR.APT**

**CITY/TOWN:** \_\_\_\_\_ **STATE:** \_\_\_\_\_ **ZIP CODE:** \_\_\_\_\_

**ADDR.CITY**

**ADDR.ST**

**ADDR.ZIP**

**TELEPHONE NUMBER:** \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

**ADDR.AREA ADDR.EXCH ADDR.LOCL**

**END 1: Thank you. If you have further questions about this study, you may call 1-888-273-0674. Goodbye.**

**135. INTERVIEWER COMMENTS:**